

Pro Se 1 (Rev. 12/16) Complaint for a Civil Case

FILED  
U.S. DISTRICT COURT  
DISTRICT OF NEBRASKA

## UNITED STATES DISTRICT COURT OCT 18 AM 11:20

for the  
District of Nebraska

OFFICE OF THE CLERK

\_\_\_\_ Division

Michael Todd Mayer

Plaintiff(s)

(Write the full name of each plaintiff who is filing this complaint. If the names of all the plaintiffs cannot fit in the space above, please write "see attached" in the space and attach an additional page with the full list of names.)

-v-

Plainsville Neb. city govt & Police

Defendant(s)

(Write the full name of each defendant who is being sued. If the names of all the defendants cannot fit in the space above, please write "see attached" in the space and attach an additional page with the full list of names.)

Case No.

8:24CV406

(to be filled in by the Clerk's Office)

Jury Trial: (check one)

☐

Yes

☒

No

## COMPLAINT FOR A CIVIL CASE

## I. The Parties to This Complaint

## A. The Plaintiff(s)

Provide the information below for each plaintiff named in the complaint. Attach additional pages if needed.

Name

Michael Todd Mayer

Street Address

331 8th St.

City and County

Uehling, (podge)

State and Zip Code

Nebraska 68063

Telephone Number

E-mail Address

## B. The Defendant(s)

Provide the information below for each defendant named in the complaint, whether the defendant is an individual, a government agency, an organization, or a corporation. For an individual defendant, include the person's job or title (if known). Attach additional pages if needed.

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Defendant No. 1

Name

Job or Title (if known)

Street Address

City and County

State and Zip Code

Telephone Number

E-mail Address (if known)

Plainview NE Nebraska city govt.

Plainview PD

205 W Locust Ave

Plainview, Pierce Co.

Nebraska 68769

402-582-4928

Defendant No. 2

Name

Job or Title (if known)

Street Address

City and County

State and Zip Code

Telephone Number

E-mail Address (if known)

Defendant No. 3

Name

Job or Title (if known)

Street Address

City and County

State and Zip Code

Telephone Number

E-mail Address (if known)

Defendant No. 4

Name

Job or Title (if known)

Street Address

City and County

State and Zip Code

Telephone Number

E-mail Address (if known)

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**II. Basis for Jurisdiction**

Federal courts are courts of limited jurisdiction (limited power). Generally, only two types of cases can be heard in federal court: cases involving a federal question and cases involving diversity of citizenship of the parties. Under 28 U.S.C. § 1331, a case arising under the United States Constitution or federal laws or treaties is a federal question case. Under 28 U.S.C. § 1332, a case in which a citizen of one State sues a citizen of another State or nation and the amount at stake is more than \$75,000 is a diversity of citizenship case. In a diversity of citizenship case, no defendant may be a citizen of the same State as any plaintiff.

What is the basis for federal court jurisdiction? (check all that apply)



Federal question



Diversity of citizenship

Fill out the paragraphs in this section that apply to this case.

**A. If the Basis for Jurisdiction Is a Federal Question**

List the specific federal statutes, federal treaties, and/or provisions of the United States Constitution that are at issue in this case.

*Cruel, unusual punishment*  
*medical malpractice*  
*false imprisonment*  
*ADA: knowing & willing misconduct - purposeful psychological abuse to a person with a federal disability of CPTSD*  
*Police brutality*  
*Basic human rights*  
*ADA: being a dr in the office (police capacity)*  
*Skinner-Defamation*  
*Refusal of service 1 year*

**B. If the Basis for Jurisdiction Is Diversity of Citizenship****1. The Plaintiff(s)****a. If the plaintiff is an individual**

The plaintiff, (name) \_\_\_\_\_, is a citizen of the State of (name) \_\_\_\_\_.

**b. If the plaintiff is a corporation**

The plaintiff, (name) \_\_\_\_\_, is incorporated under the laws of the State of (name) \_\_\_\_\_, and has its principal place of business in the State of (name) \_\_\_\_\_.

(If more than one plaintiff is named in the complaint, attach an additional page providing the same information for each additional plaintiff.)

**2. The Defendant(s)****a. If the defendant is an individual**

The defendant, (name) \_\_\_\_\_, is a citizen of the State of (name) \_\_\_\_\_. Or is a citizen of (foreign nation) \_\_\_\_\_.



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b. If the defendant is a corporation

The defendant, (name) \_\_\_\_\_, is incorporated under  
the laws of the State of (name) \_\_\_\_\_, and has its  
principal place of business in the State of (name) \_\_\_\_\_.  
Or is incorporated under the laws of (foreign nation) \_\_\_\_\_,  
and has its principal place of business in (name) \_\_\_\_\_.

(If more than one defendant is named in the complaint, attach an additional page providing the same information for each additional defendant.)

3. The Amount in Controversy

The amount in controversy—the amount the plaintiff claims the defendant owes or the amount at stake—is more than \$75,000, not counting interest and costs of court, because (explain):

Federal Disability of PTSD = Purposful Decay of disability symptoms  
CRUEL & UNUSUAL PUNISHMENT to a man with a Federal  
Disability of PTSD  
Loss of property - psychological Damage - Mental distress & Torture  
Fearful -

## III. Statement of Claim

Write a short and plain statement of the claim. Do not make legal arguments. State as briefly as possible the facts showing that each plaintiff is entitled to the damages or other relief sought. State how each defendant was involved and what each defendant did that caused the plaintiff harm or violated the plaintiff's rights, including the dates and places of that involvement or conduct. If more than one claim is asserted, number each claim and write a short and plain statement of each claim in a separate paragraph. Attach additional pages if needed.

1. allowed multiple people to threaten me with Death  
Internet slander resulting in violent abuse that was ignored  
Public Humiliation - gaslighting - refusal of service - aiding & abetting crime  
+ pierce sheriff & norfolk PD (I don't have money to sue a lot)  
gaslighting when cars vandalized  
acting as a cop in police official capacity  
Directing me to seek mental

## IV. Relief

State briefly and precisely what damages or other relief the plaintiff asks the court to order. Do not make legal arguments. Include any basis for claiming that the wrongs alleged are continuing at the present time. Include the amounts of any actual damages claimed for the acts alleged and the basis for these amounts. Include any punitive or exemplary damages claimed, the amounts, and the reasons you claim you are entitled to actual or punitive money damages.

Health care  
because  
of  
symptoms  
from  
Fear  
& Trauma

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*the greater public belief*  
*standards - False Information*  
*in pschic hospital I checked myself into*  
*knowing & wilfully keeping me in a hostile situation*  
*- Mental anguish + psychological Damage*

*\$1,000,000 million dollars for - Extreme suffering & Humiliation*

*\$1,020,000*  
*V.*  
*total*

*200,000 of property + vandalism = \$20,000 - misconduct resulting*  
*and Slander made Hundreds in Life altering & shortening*  
*of people do bad things health problems*  
*is not a right*

Under Federal Rule of Civil Procedure 11, by signing below, I certify to the best of my knowledge, information, and belief that this complaint: (1) is not being presented for an improper purpose, such as to harass, cause unnecessary delay, or needlessly increase the cost of litigation; (2) is supported by existing law or by a nonfrivolous argument for extending, modifying, or reversing existing law; (3) the factual contentions have evidentiary support or, if specifically so identified, will likely have evidentiary support after a reasonable opportunity for further investigation or discovery; and (4) the complaint otherwise complies with the requirements of Rule 11.

**A. For Parties Without an Attorney**

I agree to provide the Clerk's Office with any changes to my address where case-related papers may be served. I understand that my failure to keep a current address on file with the Clerk's Office may result in the dismissal of my case.

Date of signing: 10-12-2024

Signature of Plaintiff

Printed Name of Plaintiff

*[Handwritten Signature]*

*Michael Todd Mayer*

**B. For Attorneys**

Date of signing: \_\_\_\_\_

Signature of Attorney

Printed Name of Attorney

Bar Number

Name of Law Firm

Street Address

State and Zip Code

Telephone Number

E-mail Address



**First Northeast**  
BANK OF NEBRASKA

*Sorry for the sloppy penmanship  
I have horrible writing skills  
I hope you can read it 😊*



Mike Mayer  
Box 142  
Uehling, Neb.  
68063



Office of the Clerk  
U.S. District Court  
Roman L. Hruska U.S. Courthouse  
111 S. 19<sup>th</sup> Plaza, Suite 1152  
Omaha, Neb.

RECEIVED

OCT 18 2024

CLERK  
U.S. DISTRICT COURT

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